## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

O The period covered is \_\_

Candidate

the date of leaving office.

Election Year: .

\_\_/\_\_\_\_, through

## STATEMENT OF ECONOMIC INTERESTS

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Date Received

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## **COVER PAGE**

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A Public Document

GOVERNOR'S OFFICE

	4		LEGAL AFFAIRS				
NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER				
BARKER	JEFFREY	MICHAEL					
MAILING ADDRESS STREET (May use business address)	CITY	STATE ZIP CODE	OPTIONAL: FAX / E-MAIL ADDRESS				
	DING SACRIM	MONTO CA 95	814				
1. Office, Agency, or Court		4. Schedule Summary					
Name of Office, Agency, or Court:		➤ Total number of pages including this cover page:					
Office of the Governor							
Division, Board, District, if applicable:		<ul> <li>Check applicable schedules or "No reportable interests."</li> <li>I have disclosed interests on one or more of the attached schedules:</li> </ul>					
Communications Dept.							
Your Position:							
Chief Deputy Director		Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)  Schedule A-2 Yes – schedule attached Investments (10% or greater Ownership)					
▶ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.) Agency:							
				Position:		Schedule B Yes – schedule attached  Real Property	
2. Jurisdiction of Office (Check at least one box)							
State		Schedule D Yes – schedule attached  Income – Gifts					
County of							
☐ City of		Schedule E Yes – schedule attached  Income – Gifts – Travel Payments					
☐ Multi-County							
☐ Other		-or-					
		No reportable interests on any schedule					
3. Type of Statement (c	heck at least one box)	Z Tro Toponable interests	or any soricatio				
Assuming Office/Initial	Date:/						
		5. Verification					
Annual: The period covered is January 1, 2008, through December 31, 2008.  -Or- O The period covered is/, through December 31, 2008.  Leaving Office Date Left:/(Check one)		I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.  I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
				O The period covered is Jan	uary 1, 2008, through the	Mad	Un 27 2009
				date of leaving office.		Date Signed	(month day year)
				-or-			

Signature .

FPPC Form 700 (2008/2009)

official.)

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